

ORIGINAL

Fill in this information to identify the case:

United States Bankruptcy Court for the:
NORTHERN District of **CALIFORNIA**
 (State)

Case number (if known): _____ Chapter 11

FILEDJUL 21 2017 *RP*

☐ Check if this is an
amended filing

United States Bankruptcy Court
 San Jose, California

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>ALL PHASE CARE, INC.</u>	
<hr/>		
2. All other names debtor used in the last 8 years	<u>HOME MAKER SERVICES, INC.</u>	
Include any assumed names, trade names, and <i>doing business</i> as names	 	
<hr/>		
3. Debtor's federal Employer Identification Number (EIN)	<u>20 2 8 8 2 8 8</u>	
<hr/>		
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>871 Lakehaven Dr.</u>	
	Number Street	Number Street
	 <u>Sunnyvale CA 94089</u>	 P.O. Box
	City State ZIP Code	City State ZIP Code
	 <u>Santa Clara</u>	Location of principal assets, if different from principal place of business
	County	
		Number Street
		City State ZIP Code
<hr/>		
5. Debtor's website (URL)	<u>none</u>	
<hr/>		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____	

Debtor

ALL PHASE CARE, INC.

Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- ☒ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☐ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
☐ Chapter 9
☒ Chapter 11. Check all that apply:

Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).

☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☐ A plan is being filed with this petition.

☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).

☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.

☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

☐ No☒ Yes.District NORTHERNWhen 06/22/2017
MM / DD / YYYYCase number 17-51508

If more than 2 cases, attach a separate list.

District _____

When _____

Case number _____

MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

☒ No☐ Yes.

Debtor _____

Relationship _____

District _____

When _____

MM / DD / YYYY

List all cases. If more than 1, attach a separate list.

Case number, if known _____

Debtor

ALL PHASE CARE, INC.

Name

Case number (if known)

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety. What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____

Where is the property?

Number

Street

City

State

ZIP Code

Is the property insured?

☐ No☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5,001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000

15. Estimated assets

☐ \$0-\$50,000☐ \$50,001-\$100,000☒ \$100,001-\$500,000☐ \$500,001-\$1 million☐ \$1,000,001-\$10 million☐ \$10,000,001-\$50 million☐ \$50,000,001-\$100 million☐ \$100,000,001-\$500 million☐ \$500,000,001-\$1 billion☐ \$1,000,000,001-\$10 billion☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion

Debtor

ALL PHASE CARE, INC

Case number (if known)

Name

16. Estimated liabilities

☐ \$0-\$50,000☐ \$1,000,001-\$10 million☐ \$500,000,001-\$1 billion☐ \$50,001-\$100,000☐ \$10,000,001-\$50 million☐ \$1,000,000,001-\$10 billion☒ \$100,001-\$500,000☐ \$50,000,001-\$100 million☐ \$10,000,000,001-\$50 billion☐ \$500,001-\$1 million☐ \$100,000,001-\$500 million☐ More than \$50 billion

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- ☒ The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- ☒ I have been authorized to file this petition on behalf of the debtor.
- ☒ I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 07/18/2017
MM / DD / YYYY

x Edith Calanno
Signature of authorized representative of debtor

Edith Calanno

Printed name

Title President

18. Signature of attorney

x Frank E. Mayo
Signature of attorney for debtor

Date 07/18/2017
MM / DD / YYYY

Frank E. Mayo

Printed name

Law Office of Frank Mayo

Firm name

4962 El Camino Real, Ste. 104

Number Street

Los Altos,

City

CA

State

94022

ZIP Code

650/964-8901

Contact phone

fmayolaw@aol.com

Email address

42972

CA

Bar number

State



U.S. Department of Justice

*United States Trustee, Region 17
N.D. Cal., E.D. Cal., D. Nev.*

*San Jose Field Office 408-535-5525
280 South. First St., Suite 268 FAX 408-535-5532
San Jose, California 95113
Website address: www.usdoj.gov/ust/r17*

**AUTHORIZATION FOR DIRECT COMMUNICATION
WITH CLIENT**

Re: ALL PHASE CARE, INC. dba HOME MAKER SERVICES, INC.
Case No.

Debtor's undersigned counsel authorizes the staff of the Office of the United States Trustee ("OUST") to have direct contact with the person(s) identified below, by telephone or in writing, to discuss matters raised in the Initial Debtor Interview, including but not limited to, monthly operating reports, calculation and payment of quarterly fees, and proof of insurance, or to answer any questions which may arise regarding such matters. This authorization also extends to other persons who contact the staff of the OUST at the direction of the person(s) identified below:

Jocelyn Dinglas

Name

871 Lakeheaven Dr.

Street Address

Sunnyvale, CA 94089

City, State & Zip Code

408/735-8665 04 650/224-3318

Telephone

E-mail Address

Patrick Quyo

Name

871 Lakeheaven Dr.

Street Address

Sunnyvale, CA 94089

City, State & Zip Code

650/996-8966

Telephone

E-mail Address

Date: 7/21/2017

Frank E. Mayo
Signature of Attorney for
Debtor in Possession

Telephone: 650/964-8901

fmayo@law5aol.com

Frank E. Mayo

Printed Name of Attorney for
Debtor in Possession

RESOLUTION OF BOARD OF DIRECTORS

WHEREAS, All Phase Care Inc. conducted an emergency meeting on June 15, 2017 for the purpose of considering its financial position in view of outstanding claims of Trinidad Amparo and Nelia Grayblas and the unwillingness of Trinidad Amparo to accept an installment payment plan to satisfy her claim; and after due discussion,

RESOLVES to authorize the filing of a Chapter 11 Bankruptcy proceeding as the most viable method of proceeding.

Dated: June 15, 2017



Patrick Quyo, Secretary/Director

STATEMENT UNDER RULE

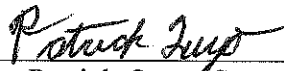
Fed. R. Bankruptcy P. 1007(a)(3)

The equity security holders consist of the following:

Edith Calanno – 100% of the issued and outstanding shares.

There are no other securities authorized or issued by debtor.

Dated: July 18, 2017




Patrick Quye, Secretary/Director

STATEMENT OF CORPORATE OWNERSHIP

Fed. R. Bankruptcy P. 1007(a) (1)

Debtor, All Phase Care Inc., provides the following statement of Corporate Ownership. There is no Corporate Shareholder that directly or indirectly own 10% or more of any class of the Corporations equity interest and there are no entities to report in this statement

Dated: July 18, 2017



Patrick Quyo, Secretary/Director

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF CALIFORNIA**

In re: ALL PHASE CARE, INC.

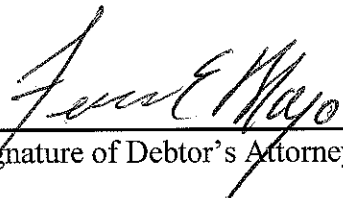
Case No.:

Debtor(s) /

CREDITOR MATRIX COVER SHEET

I declare that the attached Creditor Mailing Matrix, consisting of 1 sheets, contains the correct, complete and current names and addresses of all priority, secured and unsecured creditors listed in debtor's filing and that this matrix conforms with the Clerk's promulgated requirements.

DATED: 7/21/2017



Signature of Debtor's Attorney or Pro Per Debtor

Trinidad Amparo
c/o Fred Schwinn, Esq.
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San Jose, CA 95113

Nelia Grayblas
c/o Nina Shah, Esq.
Golden Gate University School of Law
536 Mission Street
San Francisco, CA 94105